

**SECTION - B**

- Instructions :**
- 1) Use blue/black ball point pen only.
  - 2) Do not write anything on the blank portion of the question paper. Rough work should not be done on the Answer Sheets or anywhere on the Question Paper except the specific space provided for the rough work. If written anything, such type of act will be considered as an attempt to resort to unfair means.
  - 3) All questions are compulsory.
  - 4) The number to the right indicates full marks.
  - 5) Draw diagrams wherever necessary.
  - 6) Distribution of syllabus in Question Paper is only meant to cover entire syllabus within the stipulated frame. The Question paper pattern is a mere guideline. Questions can be asked from any paper's syllabus into any question paper. Students cannot claim that the Question is out of syllabus. As it is only for the placement sake, the distribution has been done.
  - 7) Use a common answer book for section B.

**2. Long Answer Questions (Solve any 2 Out of 3) :- [2 × 15 = 30]**

- a) A young boy of 20 years age has been suffering from right ear discharge for 5 years. The discharge is continuous, putrid and yellowish in colour. He is not complaining of ear pain, hearing loss or tinnitus. He is not giving any history of dizziness, headache or facial weakness.
- i) What is your provisional diagnosis of this case study?
  - ii) What are the clinical examination findings which you expect from this case history?
  - iii) What could be the reasons of absence of hearing loss in this patient?
  - iv) How will you treat this case?
  - v) What are the complications possible in this case?



- b) A 5 - year - old young boy has been getting repeated episodes of bleeding from his right nose for 6 months. He is not giving any history of cold or fever. On examination of the nose, Little's area was found congested and some crusting could be seen in his right nasal vestibule. Removal of crust from Little's area resulted in oozing of blood. On further enquiry, parent agreed that he is fond of putting his finger in his nose to remove the small nasal crust.

- i) What could be the provisional diagnosis for this case?
- ii) What is the blood supply of nasal septum?
- iii) What is Kiesselbach's plexus and Woodruff's plexus?
- iv) What are the causes of nasal bleeding?
- v) How will you manage this case?

[1+3+3+3+5]

- c) 42 - year - old female patient came with fluctuating hearing loss in left ear since 1 week. Patient also gives history of episodic giddiness and tinnitus in left ear since 1 month.

- i) What is the most probable diagnosis?
- ii) What is the aetiology?
- iii) What are the investigations that you will advise?
- iv) What are the variants of this disease?
- v) How will you manage this case?

[1+3+4+3+4]

### 3. Short Answer Questions :-

[3 × 5 = 15]

- a) Types of consent.
- b) Enumerate causes of tinnitus.
- c) Write a short note on Ramsay Hunt Syndrome.



## 4. Long Answer Questions :-

A 28-year-old male who is a known case of allergic rhinitis presented with bilateral nasal block since 1 month. Parents give history of change of voice to dull, hyponasal character. On anterior rhinoscopy, minimal mucoid discharge and glistening white globular mass seen in bilateral nasal cavity.

- i) What are the causes of nasal block?
- ii) Comparison between ethmoidal and antro-choanal polyp.
- iii) What is the etiopathogenesis of this case nasal polyposis?
- iv) How will you medically treat this patient?
- v) How will you surgically manage this case?

[2+3+4+3+3]

## 5. Short Answer Questions (Solve any 4 Out of 5) :-

[4 × 5 = 20]

- a) Ludwig's Angina.
- b) Rhinosporidiosis.
- c) Causes of stridor.
- d) Indications of Tonsillectomy.
- e) Schuller's View X-ray

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